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| for maintenance fee notifi | ications. | ivi inse in sicon i, cy (u) o | | | | |
|--|------------------------------|---|-----------------|--|---|--|
| CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address) 23416 CONNOLLY BOVE LODGE & HUTZ LLP 1007 North Orange Street P. O. Box 2207 Wilmington, Delaware 19899-2207 | | | | Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission. Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below. | | |
| | | | | J. Lynn | Ferry | (Depositor's name) |
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| A DOM TO A PROVINCE | PH NIO NI TEP | EIDOTALA | ACD DRIENE | • | ber 28, 2009 | (Date) |
| APPLICATION NO. 10/771,676 | FILING DATE 02/03/2004 | FIRST NAMED INVEN' Anton Kralimann | | OK | ATTORNEY DOCKET N 15551*1 (P13518US/La | |
| TITLE OF INVENTION: TUBULAR SAUSAGE CASING WITH A YARN TIE HAVING A METAL INSERT AND A PROCESS FOR PRODUCTION THEREOF | | | | | | |
| APPLN, TYPE | SMALL ENTITY | ISSUE FEE | PUBLICA | TION FEE | TOTAL FEE(S) DUE | DATE DUE |
| Non-Provisional | no | \$1,510.00 | \$300.0 | | \$1,810.00 | 09/28/2009 |
| EXAMINER ART UNIT CLASS-SUBCLASS | | | | | | |
| M. C. M | | 1772 | | nt front page, l | | |
| Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. (1) the names attorneys or agent (2) the name of a registered attorn up to 2 registered name is listed, no | | | | tematively, irm (having as a agent) and the attorneys or age | a member 2 | y Bove Lodge & Hutz LLP |
| | | | HE PATENT (| print or type) | | |
| 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) | | | | | | |
| CaseTech GmbH , Walsrode, Germany | | | | | | |
| Please check the appropriate assignee category or categories (will not be printed on the patent): Individual X Corporation or other private group entity Government | | | | | | |
| 4a. The following fce(s) are enclosed: 4b. Payment of Fe | | | | | | |
| X Issue Fee A check in the amo | | | | ount of the fee(s) is enclosed. | | |
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| | ms SMALL ENTITY sta | · . | b. Applica | nt is no longer | claiming SMALL ENTITY | 7 status. See 37 CFR 1.27(g)(2). |
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| Authorized Signature | | | | | Date S | September 28, 2009 |
| Typed or printed name Aaron R. Ettelman | | | | Registration No. | | |
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